

Please type a plus sign (+) inside this box \Rightarrow 🕇	٦
---	---

PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

Attomey Docket No. AN05939P1 US OF First Inventor or Application Identifier Michael Person Title POLYSILICATE MICROGELS

TRANSMITTAL EM122069453US (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) Express Mail Label No. Assistant Commissioner for Patents **APPLICATION ELEMENTS** Ω ADDRESS TO: **Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington DC 20231 * Fee Transmittal Form (e.g., PTO/SB/17) 5. Microfiche Computer Program (Appendix) (Submit an original and a duplicate for fee processing) 6. Nucleotide and/or Amino Acid Sequence Submission X Specification [Total Pages 20 2. (if applicable, all necessary) (preferred arrangement set forth below) Computer Readable Copy - Descriptive title of the Invention Cross References to Related Applications b. Paper Copy (identical to computer copy) Statement Regarding Fed sponsored R & D Statement verifying identity of above copies C. - Reference to Microfiche Appendix Background of the Invention **ACCOMPANYING APPLICATION PARTS** - Brief Summary of the Invention Assignment Papers (cover sheet & document(s)) Brief Description of the Drawings (if filed) 37 C.F.R.§3.73(b) Statement Power of - Detailed Description 8 (when there is an assignee) Attorney - Claim(s) 9 English Translation Document (if applicable) Abstract of the Disclosure Information Disclosure Copies of IDS 3. Drawing(s) (35 U.S.C. 113) Total Sheets Statement (IDS)/PTO-1449 Citations **Preliminary Amendment** 4. Oath or Declaration (unsigned)[Total Pages Return Receipt Postcard (MPEP 503) 12. **x** Newly executed (original or copy) (Should be specifically itemized) Copy from a prior application (37 C.F.R. § 1.63(d)) * Small Entity h Statement filed in prior application, (for continuation/divisional with Box 16 completed) 3 Statement(s) Status still proper and desired **DELETION OF INVENTOR(S)** (PTO/SB/09-12) i. Certified Copy of Priority Document(s) Signed statement attached deleting (if foreign priority is claimed) inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). 5 Other: NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28). 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment: Continuation-in-part (CIP) Continuation Divisional of prior application No: PCT / SE98/01101 Prior application information: Examiner Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. CORRESPONDENCE ADDRESS 17. Customer Number or Bar Code Label Correspondence address below (Insert Customer No. or Attach bar code label here) Ralph J. Mancini Name Akzo Nobel Inc. Intellectual Property Department Address 7 Livingstone Avenue 10522-3408 NY Zip Code City Dobbs Ferry 693-4236 (914)(914)674-5465 U.S.A. Telephone Fax Country Registration No. (Attorney/Agent) Name (Print/Type) 34,054

Name (Print/Type) Ralph J. Mancini Registration No. (Attomey/Agent) 34,054
Signature Date 12/6/99

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (6/99)

Approved for use through 09/30/2000. OMB 0651-0032

Fatent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

del die Laperwork Reduction Act of 1999	, no persons are required to r	copona to a concession of unor	mation unicos it displays a valid Civio Control	namber.
FEE TRANSMITTAL		Complete if Known		
		Application Number		
for FY 1	999	Filing Date		
Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.	First Named Inventor	Michael Persson		
	Examiner Name			
See 37 C.F.R. §§ 1.27	and 1.28.	Group / Art Unit		
TOTAL AMOUNT OF PAYMENT	(\$) 1264.00	Attorney Docket No.	ANO5939P1 US	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:	3. ADDITIONAL FEES Large Entity Small Entity					
Deposit 01 1250	Fee Fee Fee Fee Fee Code (\$) Code (\$)	Fee Paid				
Account Number 01–1350	105 130 205 65 Surcharge - late filing fee or oath	7				
	127 50 227 25 Surcharge - late provisional filing fee or					
Deposit Account Akzo Nobel Inc.	cover sheet.					
Name IRES ROBEL IRES	139 130 139 130 Non-English specification					
Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	147 2,520 147 2,520 For filing a request for reexamination					
2. Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action					
Check Money Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action					
FEE CALCULATION	115 110 215 55 Extension for reply within first month					
1. BASIC FILING FEE	116 380 216 190 Extension for reply within second month					
Large Entity Small Entity	117 870 217 435 Extension for reply within third month					
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118 1,360 218 680 Extension for reply within fourth month					
101 760 201 380 Utility filing fee 760	128 1,850 228 925 Extension for reply within fifth month					
106 310 206 155 Design filing fee	119 300 219 150 Notice of Appeal 120 300 220 150 Filing a brief in support of an appeal					
107 480 207 240 Plant filing fee	121 260 221 130 Request for oral hearing					
108 760 208 380 Reissue filing fee	138 1.510 138 1.510 Petition to institute a public use proceeding					
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable					
SUBTOTAL (1) (\$) 760.00	141 1,210 241 605 Petition to revive - unintentional					
2. EXTRA CLAIM FEES	142 1,210 242 605 Utility issue fee (or reissue)					
Fee from Extra Claims below Fee Paid	143 430 243 215 Design issue fee					
Total Claims 35 -20** = 15 X 18 = 270	144 580 244 290 Plant issue fee					
Independent 6 - 3** = 3 × 78 = 234	122 130 122 130 Petitions to the Commissioner					
Multiple Dependent = =	123 50 123 50 Petitions related to provisional applications					
**or number previously paid, if greater, For Reissues, see below	126 240 126 240 Submission of Information Disclosure Stmt					
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)					
103 18 203 9 Claims in excess of 20	146 760 246 380 Filing a submission after final rejection	<u></u>				
102 78 202 39 Independent claims in excess of 3	(37 ČFR § 1.129(a)) 149 760 249 380 For each additional invention to be					
104 260 204 130 Multiple dependent claim, if not paid	149 760 249 380 For each additional invention to be examined (37 CFR § 1.129(b))					
109 78 209 39 ** Reissue independent claims over original patent	Other fee (specify)					
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)					
SUBTOTAL (2) (\$)504.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3)					
SUBMITTED BY Complete (if applicable)						
Name (Print/Type) Ralph J. Mancini Registration No. (Attorney/Agent) 34,054 Telephone (914) 674-5465						
Signature Date 12/6/99						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.